

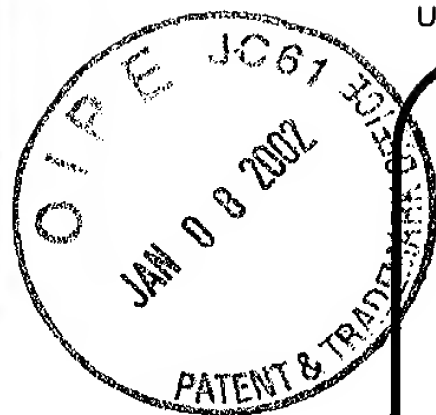
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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032  
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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration  
Submitted  
With Initial  
Filing  
**OR**  
☐ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

**Attorney Docket Number** GG110US  
**First Named Inventor** Timothy David Spector

**COMPLETE IF KNOWN**

**Application Number** 09/807,526  
**Filing Date** April 12, 2001  
**Group Art Unit** Unassigned  
**Examiner Name** Unassigned

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Polymorphism in a TGF-beta Gene Correlated to Osteoporosis

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 04/12/2001 as United States Application Number or PCT International

Application Number 09/807,526 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
PCT/GB99/03446	WO	10/18/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
GB 9822682.2	GB	10/16/1998	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 3]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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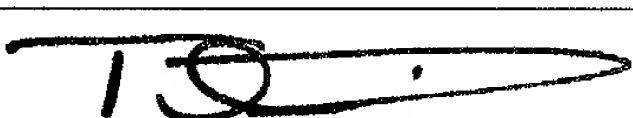
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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input type="checkbox"/> Customer Number or Bar Code Label	<input type="checkbox"/>		OR	<input checked="" type="checkbox"/> Correspondence address below
Name	Patricia A. McDaniels					
Address	Gemini Genomics, Inc.					
Address	189 Wells Avenue					
City	Newton		State	MA		
ZIP	02459					
Country	USA		Telephone	(617) 527-4198		
Fax	(617) 527-4199					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Timothy David		Family Name or Surname	Spector		
Inventor's Signature			Date			
Residence: City	London		State	Country	Citizenship	
	GB			Great Britain	GB	
Mailing Address 22 Aberdeen Road						
Mailing Address						
City	London		State	ZIP	Country	
				N5 2UH	Great Britain	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Richard William		Family Name or Surname	Keen		
Inventor's Signature			Date			
Residence: City	London		State	Country	Citizenship	
				Great Britain	GB	
Mailing Address 46 Latimer Gardens						
Mailing Address Pinner Wood Park						
City	Middlesex		State	ZIP	Country	
				HA5 3RA	Great Britain	
<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						

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<b>Address</b> <u>Gemini Genomics, Inc.</u>			
<b>Address</b> <u>189 Wells Avenue</u>			
<b>City</b> <u>Newton</u>		<b>State</b> <u>MA</u>	<b>ZIP</b> <u>02459</u>
<b>Country</b> <u>USA</u>	<b>Telephone</b> <u>(617) 527-4198</u>		<b>Fax</b> <u>(617) 527-4199</u>
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
<b>NAME OF SOLE OR FIRST INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b> <u>Timothy David</u>		<b>Family Name or Surname</b> <u>Spector</u>	
<b>Inventor's Signature</b>			<b>Date</b>
<b>Residence: City</b> <u>London</u>	<b>State</b>	<b>Country</b> <u>Great Britain</u>	<b>Citizenship</b> <u>GB</u>
<b>Mailing Address</b> <u>22 Aberdeen Road</u>			
<b>Mailing Address</b>			
<b>City</b> <u>London</u>	<b>State</b>	<b>ZIP</b> <u>N5 2UH</u>	<b>Country</b> <u>Great Britain</u>
<b>NAME OF SECOND INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b> <u>Richard William</u>		<b>Family Name or Surname</b> <u>Keen</u>	
<b>Inventor's Signature</b> <u>[Signature]</u>	<b>Date</b> <u>4/5/01</u>		
<b>Residence: City</b> <u>London</u>	<b>State</b>	<b>Country</b> <u>Great Britain</u>	<b>Citizenship</b> <u>GB</u>
<b>Mailing Address</b> <u>46 Latimer Gardens</u>			
<b>Mailing Address</b>			
<b>City</b> <u>Pinner</u>	<b>State</b> <u>Middlesex</u>	<b>ZIP</b> <u>HA5 3RA</u>	<b>Country</b> <u>Great Britain</u>
<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			